FORM D

PROCESSED

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

APR 22 2008 THOMSON FINANCIAL

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

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ОМВ	APPRO\	/AL	
OMB Num		3235-	
Expires: Estimated	April 3	0.20	80
Estimated	average	burde	n
hours per r			

SEC USE ONLY

Serial

Prefix

UNIFOR	SECTION 4(6), AND/OR RM LIMITED OFFERING EXEM	IPTION DATE RECEIVED
Name of Offering (check if this is an amendm	ent and name has changed, and indicate change.)	
Backstage Holdings, LLC \$650,000 Voting U	nit Offering	
Filing Under (Check box(es) that apply):	le 504	Section (Carlo Dick)
	A. BASIC IDENTIFICATION DATA	APR 1 d avenue
1. Enter the information requested about the issue	т /	अगर । हे समाप्त
Name of Issuer (check if this is an amendment Backstage Holdings, LLC	and name has changed, and indicate change.)	Washington, DC
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
207 N. Chestnut St., Chaska, MN 55318		952-466-5734
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)

Brief Description of Business

Acquisition development marketing licensing and calculated the second second

Acquisition, development, marketing, licensing, and sales of photographic images and artwork.

Type of Business Organization

corporation
business trust

Iimited partnership, already formed
business trust

limited partnership, to be formed

limited liability company

speci 0

08046757

Actual or Estimated Date of Incorporation or Organization: 015 016 Actual Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:

Enter two-letter U.S. Postal Service abbreviation for State:

CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ✓ Director General and/or Managing Partner Full Name (Last name first, if individual) Keskey, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 207 N. Chestnut St., Chaska, MN 55318 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Tufto, Kris Business or Residence Address (Number and Street, City, State, Zip Code) 207 N. Chestnut St., Chaska, MN 55318 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Willey, Rob Business or Residence Address (Number and Street, City, State, Zip Code) 207 N. Chestnut St., Chaska, MN 55318 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

Full Name (Last name first, if individual)

Business or Residence Address (Number and Street, City, State, Zip Code)

					B. II	NFORMATI	ON ABOU	T OFFERI	NG				
1.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes	No 🔀			
				Ansv	wer also in	Appendix,	Column 2	, if filing t	inder ULO	E.			
2.	2. What is the minimum investment that will be accepted from any individual?								Φ	000.00			
3.	Does the	e offering	permit join	t ownership	p of a sing	le unit?	••••••					Yes	No E
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	I Name () ot Applica		first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of Ass	ociated Br	oker or De	aler				 					
Sta	tes in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	Purchasers						
	(Check	"All States	" or check	individual	States)	***************************************	***************	************	***************************************	***************************************		☐ Al	l States
	IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if ind	ividual)									
Bu	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Na	me of Ass	sociated Br	oker or De	aler									
Sta	ites in Wh	ich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers				-	-	
	(Check	"All States	or check	individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			***************************************		••••••	□ A1	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	ll Name (Last name	first, if ind	ividual)					·			-	
Bu	siness or	Residence	Address (Number an	d Street, C	City, State,	Zip Code)						
Na	me of As	sociated B	roker or De	aler	···							-	
Sta	ites in Wh	nich Persor	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers			_			
(Check "All States" or check individual States)								I States					
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	,	-	
	Delit		
	Equity	\$	\$
	Common Preferred	_	_
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify LLC Membership)		
	Total	\$_650,000.00	\$ 650,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	; T	Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$ 650,000.00
	Non-accredited Investors		
	Total (for filings under Rule 504 only)		\$ 650,000.00
	-	3	3 000,000.00
3.	Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		2
	Regulation A		\$
	Rule 504		\$ 650,000.00
	Total		\$ 650,000.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees	[\$
	Printing and Engraving Costs	[] \$
	Legal Fees	<u>F</u>	\$ 3,000.00
	Accounting Fees	_	0.000.00
	Engineering Fees	-] \$
	Sales Commissions (specify finders' fees separately)	_	 7 \$
	Other Expenses (identify)	_] \$
	Total		\$ 5,000.00

	b. Enter the difference between the aggregate offe and total expenses furnished in response to Part C — proceeds to the issuer."	Question 4.a. This difference is the "adjusted	gross	\$645,000.00
5.	Indicate below the amount of the adjusted gross preach of the purposes shown. If the amount for an check the box to the left of the estimate. The total oproceeds to the issuer set forth in response to Par	ny purpose is not known, furnish an estimate f the payments listed must equal the adjusted;	e and	
			Payments to	
			Officers, Directors, &	Doumanto to
			Affiliates	Payments to Others
	Salaries and fees		300,000.00	[Z] \$ 100,000.00
	Purchase of real estate		•	==
	Purchase, rental or leasing and installation of ma-			
	and equipment		🗆 \$	S 8 60,000.00
	Construction or leasing of plant buildings and fac	rilities	🗆 \$	\$
	Acquisition of other businesses (including the va offering that may be used in exchange for the ass issuer pursuant to a merger)	ets or securities of another		□\$
	Repayment of indebtedness			
	Working capital			
	Other (specify):		— □ ₃———	L.) 3
	Column Totals		\$ 300,000.00	[] \$ 345,000.00
	Total Payments Listed (column totals added)			5,000.00
		-		
	· I			
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fu information furnished by the issuer to any non-acc	mish to the U.S. Securities and Exchange Co	mmission, upon writter	
Issu	er (Print or Type)	Signature	Date	
Ва	ckstage Holdings, LLC	1 The P	March 19, 2008	
Nar	ne of Signer (Print or Type)	Title of igner (Print or Type)		****
Kris	Tufto	Chief Executive Officer		

- ATTENTION --

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

۱.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification	Yes	No
	provisions of such rule?		X

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date	
Backstage Holdings, LLC	J-hND	March 19, 2008	
Name (Print or Type)	Tale (Print or Type)		
Kris Tufto	Chief Executive Officer		

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be inanually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited offered in state amount purchased in State waiver granted) investors in State (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) (Part C-Item 1) Number of Number of Accredited Non-Accredited Investors Investors Yes State Yes No Amount Amount No AL ΑK AZAR CA CO CT DE DC FL GA HI ID ΙL IN ĪΑ KS KY LA ME MD MA MI MN X LLC Membership \$650,000.00 \$0.00 3 X MS

APPENDIX 1 2 3 4 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach offering price Type of investor and explanation of to non-accredited investors in State offered in state amount purchased in State waiver granted) (Part C-Item 2) (Part B-Item 1) (Part C-Item 1) (Part E-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No MO MT NE NV NH NJ NM NY NC ND OH OK OR PA RI SC SD TN TX UT VT VA WA WV WI

				APP	ENDIX					
1		2	3 Type of security	4			5 Disqualification			
	to non-a	d to sell accredited rs in State 3-Item 1)	and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR					<u> </u>					